Hydatid Disease

Introduction:-

- Hydatid disease is a parasitic infestation by a tapeworm of the genus Echinococcus.
- Dogs are the definitive hosts of the tiny tapeworm E. granulosus.
- Humans act as accidental intermediate host.
- Echinococcosis can involve any organs, but the liver is the most common organ involved, followed by the lungs.
- The disease is common in the Middle East, North and East Africa, Australia and Argentina.

Pathology and Pathogenesis:-

- ✓ The larval stage, a hydatid cyst, normally occurs in sheep, cattle, camels and other animals that are infected from contaminated pastures or water.
- ✓ By handling a dog or drinking contaminated water, humans may ingest eggs.
- ✓ The embryo is liberated from the ovum in the small intestine and invades the blood stream, spreading to the liver.
- The resultant cyst grows very slowly, sometimes intermittently.

Pathology and Pathogenesis:-

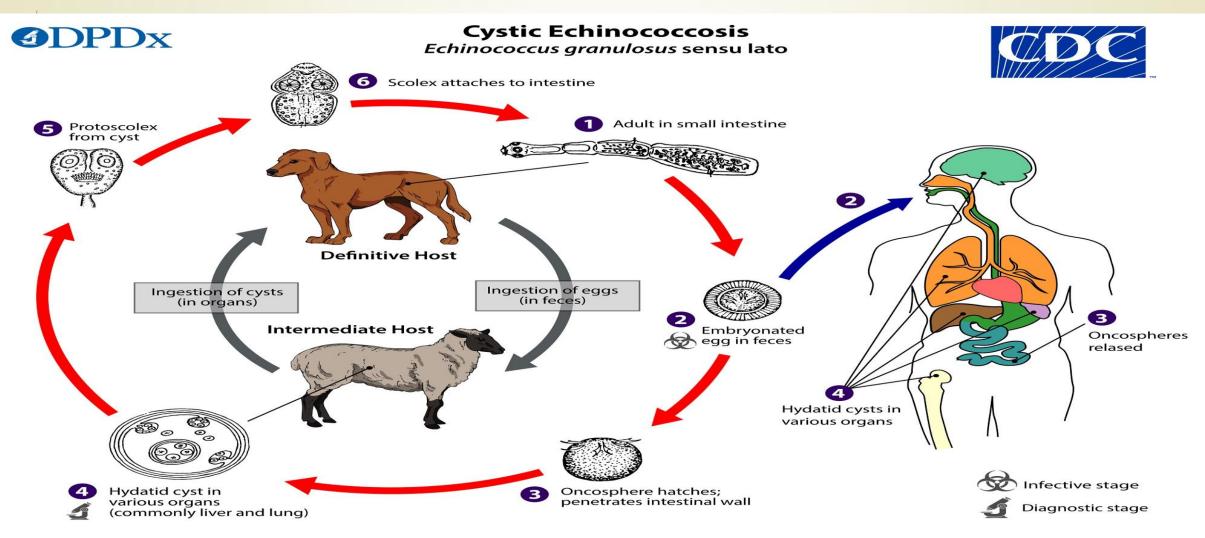
✓ It is composed of an enveloping fibrous peri cyst, laminated hyaline membrane (ectocyst) and inner germinal layers (end cyst) that give rise to daughter cysts, or a germinating cystic brood capsule in which larvae (protoscolices) develop.

Over time, some cysts calcify and become non-viable.

E. multilocularis, which has a cycle between foxes and voles, causes a similar but more severe infection, 'alveolar hydatid disease', which invade the liver like cancer.

Pathology and Pathogenesis:-

Lifecycle of E. granulosus.



Clinical features:-

- ✓ Many hydatid cysts remain asymptomatic, is typically acquired in childhood and, after growing for years.
- ✓ The degree of symptoms is depend on :-
- The parasite load of the cysts.
- The site of the cysts.
- The size of the cysts.
- The symptoms can produced by a pressure effect or cyst complications.
- ✓ Most symptomatic cysts are larger than 5 cm in diameter.
- ✓ Most organ affected the liver, and lungs.
- ✓ Less organ affected the CNS, bone, and silent in breast, kidney, adrenals and sheart Mansoo

Clinical features :-

- ✓ Pressure effects are initially may include :-
- Nonspecific pain.
- Cough.
- low grade fever,
- The sensation of abdominal fullness.
- As mass grows, the symptoms become more specific ;-
- In the liver, the pressure effect can produce symptoms of :-
- Obstructive jaundice.
- Abdominal pain.
- > In the lungs, produce :-
- Chronic cough.
- Dyspnea.
- Pleuritic chest pain wan Mansoor
- Hemoptysis.

Clinical features:-

- ✓ Symptoms of cysts complications may occur as a result of :-
- Infection of the cyst.
- Leakage of the cyst.
- ✓ Physical examination :-
- Findings in patients with echinococcosis are nonspecific.
- ✓ Finding are related to :-
- The effect of the cyst on the anatomy or function of the affected organ(s).
- An acute allergic reaction.

Investigations:-

The diagnosis depends on :-

✓ The clinical data.

Radiological (CT, MRI)and ultrasound findings in a patient that has close contact with dogs in an endemic area.

A vascular fluid filled cysts and/or calcification.

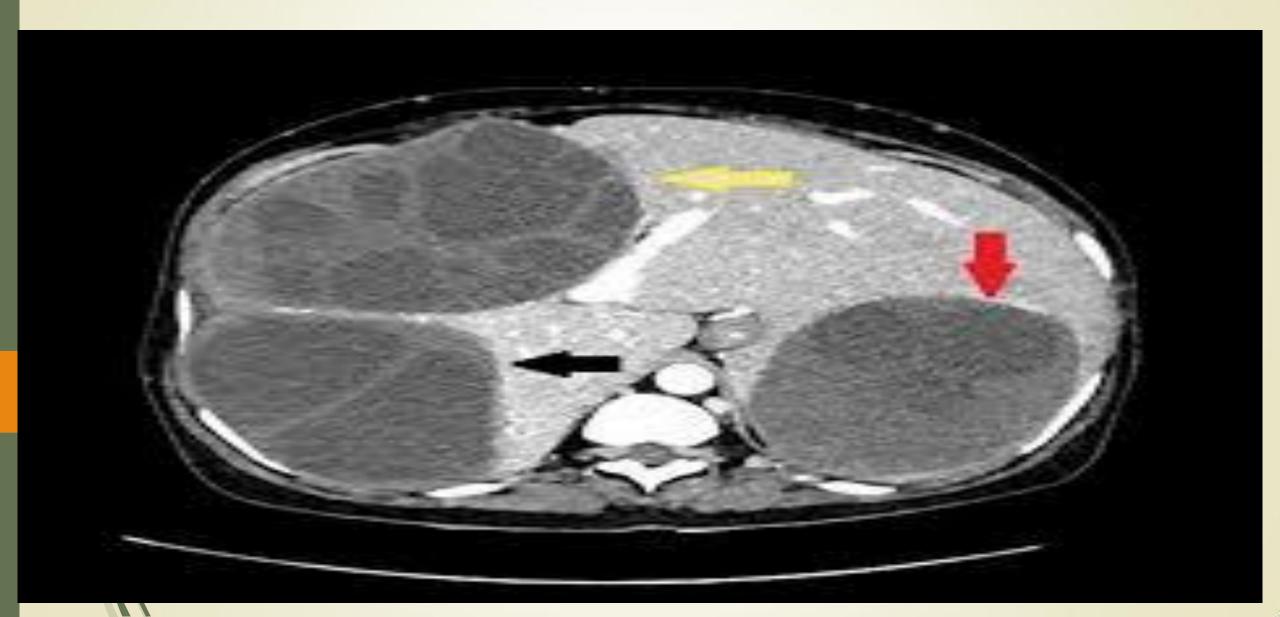
✓ Serology:- Complement fixation and ELISA are positive for E. antigen in 70–90% of patients.

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Investigations:-



Investigations:-



Management:-

- Treatment depend on cyst type, size, location, and complications
- Hydrated cysts should be excised surgically wherever possible.
- > Chemotherapy is indicated in :-
- Patients with primary liver or lung cysts that are inoperable.
- Patients with cysts in 2 or more organs.
- Albendazole (400 mg twice daily for 3 months) should also be used and is often combined with PAIR (percutaneous puncture, aspiration, injection of scoliocidal agent and re-aspiration).
- Praziquantel (20 mg/kg twice daily for 14 days) also kills protoscolices perioperatively. An Mansoor

Prevention:-

- Prevention is difficult when there is a close association with dogs.
- The reduces the prevalence of disease by :-
- Personal hygiene.
- Satisfactory disposal of carcasses.
- Meat inspection.
- Deworming of dogs.

Prognosis:-

- Mainly depends on the type of infestation (cystic or alveolar echinococcosis).
- > In CE :-
- ✓ The prognosis is generally good.
- ✓ Complete cure is possible with total surgical excision without spillage.
- > In AE :-
- ✓ The prognosis is much worse.
- Cure is only possible with early detection and complete surgical excision.
- In latter is not possible, the addition of long-term chemotherapy has decreased the mortality rates from 94% to 10 %.

Thank you